Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

(Column 1) (Column 2)								SMALL ENTITY TYPE		ΩB	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			Q				. [	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE		OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			N		. 0			·	000.00	OH		7 10.00
			minus 20=		. /			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS  MULTIPLE DEPENDENT CLAIM PI			minus 3 =		1 4 _			X40=		OR	X80=	
MC	ILTIPLE DEPEN	IDENT CLAIM PI	RESENI					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	Ę	TOTAL		OR	TOTAL	
Claims as amended - Part II								,	<u> </u>	ט	OTHER	THAN
		(Column 1)	174		mn 2) IEST	(Column 3)	1 17	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEET	<u> </u>	<u>.</u>		
AMENDWENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						] }			OR		
								+135=		OR	+270=	
										OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	1 _			_		
AMENDMENT C		REMAINING AFTER AMENDMENT		HIĞH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		= '		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=			X80=	
_	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDEN	CLAIM			740-		OR	7,00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE	
		ber Previously Pai					r four	nd in the ann	ronriate box	in col	ımn 1	į